TOWN OF WAPPINGER



BUILDING DEPARTMENT

20 MIDDLEBUSH ROAD WAPPINGERS FALLS, NY 12590-0324 (845) 297-6256 FAX: (845) 297-0579

BUILDING PERMIT APPLICATION

(RENOVATION / REPAIR OF EXISTING STRUCTURE) (INCLUDING BASEMENT AREAS)

O Commercial

O Residential

*** THE FOLLOWING MUST BE SUBMITTED AT TIME OF APPLICATION ***					
O APPLIC FORM COMPLETED	O INSURANCE SUBMITTED (WC&DB)	O INSURANCE ON FILE	O OWNER'S CONSENT		

THE FOLLOWING WILL BE NEEDED TO PROCESS YOUR APPLICATION

- 1. **Two copies** of scaled drawings showing all details of construction and related footings, cross sections and floor plans. <u>Only</u> detailed drawings will be accepted and may be required to be submitted by a licensed design professional upon review of the Code Official. All applicable building codes must be adhered to from the N.Y.S. Residential and Building code.
 - A. Cross sections specifically drawn with materials to be used
 - B. Floor plans showing use of all rooms
 - C. Ceiling heights and projections
 - D. Window/Door clear opening sizes
 - E. Building/Structure elevations
 - F. Rafter/Joist/Header spans and sizes
 - G. Insulation values
 - H. Smoke/carbon Dioxide Detector placement
 - I. Plumbing/Mechanical details
- 2. Any increase in bedrooms will require approval from the Board of Health, if septic is currently used.

ALL FEES ARE NON-REFUNDABLE

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REQUIREMENTS FOR ALL BUILDING PERMIT APPLICATIONS

APPLICATIONS MUST BE COMPLETELY FILLED OUT
AND SIGNED
OWNERS SIGNATURE AND/OR OWNERS CONSENT
FORM REQUIRED
PLOT PLANS MUST BE FILLED OUT COMPLETELY AND
SIGNED
APPLICATION FEE MUST ACCOMPANY APPLICATION
SURVEY OF PROPERTY REQUIRED
INSURANCE REQUIRED (WORKERS COMP. AND DISAB. OR EXEMPTION FORM)
The Town of Wappinger requires proof of Workers' Compensation (C105 or 26.3) and Disability (DB120) insurance. The application for a Certificate of Attestation of Exemption, Form CE-200, from Workers' Compensation and/or Disability and Paid Family Leave Benefits coverage may only be completed by homeowners doing their own work, entities with no employees and/or out-of-state entities obtaining a contract or license in which all the work is being performed outside of New York State.
ANY NEWLY PURCHASED PROPERTIES MUST ATTACH THE
RECORDING PAGE FROM THE DUTCHESS COUNTY CLERK

IF APPLICATION IS NOT LEGIBLE IT WILL NOT BE ACCEPTED

APPLICATIONS CAN ONLY BE PROCESSED ONCE <u>ALL</u> REQUIRED ITEMS ARE RECEIVED

TOWN OF WAPPINGER BUILDING DEPARTMENT
20 Middlebush Road, Wappingers Falls, N.Y. 12590
telephone: 845-297-6256 fax: 845-297-0579

APPLICATION FOR BUILDING PERMIT

APPLICATION TY	PE: O Residentia	al ZONE:	DATE:
O New Constructio	n O Commerc	ial APPL #: _	PERMIT #
O Renovation/Alter	ation O Multiple l	Dwelling GRID:	
APPLICANT NAMI	<u>E</u> :		
TEL #:	CELL:	FAX #:	E-MAIL:
NAME OWNER OF	BUILDING/LAND	:	
PROJECT SITE AD	DRESS:		
MAILING ADDRESS	S:		
TEL #:	CELL:	FAX #:	E-MAIL:
BUILDER/CONTRA COMPANY NAME:	ACTOR DOING WO	<u>ORK</u> :	
TEL #:	CELL:	FAX #:	E-MAIL:
DESIGN PROFESS		77.477.11	73.64W
1 EL #:	CELL:	FAX #:	E-MAIL:
·			D: R-SIDEYARD: _
ESTIMATED COST			
NON-REFUNDABL	E APPL. FEE:	PAID ON: CHECK	X # RECEIPT #:
BA	ALANCE DUE:	PAID ON: CHECK	X #RECEIPT #:
APPROVALS: ZONING ADMINIS O Approved O Do		FIRE INSP O Approve	PECTOR: ed O Denied Date:
Signature of Applica	nt	Signature o	of Building Inspector

TOWN OF WAPPINGER



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OWNER CONSENT FORM

BUILDING PERMIT #_____ APPLICATION #____

SITE LOCATION:	
GRID: #	
Name of APPLICANT:	
(Person PHYS	ICALLY coming in to apply) (IF other than the Owner)
~	CERTIFICATION ~
created, erected, changed, converted or enla have been issued by the Building Inspector FAILURE TO COMPLY MAY RESULT	o use or permit the use of any building or premises or part thereof hereafter rged, wholly or partly, in its use or structure until a Certificate of Occupancy shall and the Zoning Administrator. TIN COURT PROCEEDINGS.
Wappinger to approve or deny the above a I understand that this permit will not be cl building inspector having access to the int will remain as a violation on my property	, owner of the land/site/building hereby give my permission for the Town of oplication in accordance with local and state codes and ordinances. osed out unless all proper inspections are completed which can include the erior of my residence. If this permit is not closed before the expiration date it until it is closed out. After the expiration date the permit fee and application will at the permit. I understand that I am ultimately responsible for the closure of
Date	Owner's Signature
Owner's Telephone Number	Print Name
	Print Owner's Address
Code Enforcement Official:	FOR OFFICE USE ONLY

TOWN OF WAPPINGER BUILDING DEPARTMENT INSPECTION PROCEDURE

ANY CHANGES to plans require approval by Code Official You are required to call **1-800-962-7962** before you excavate and contact **Underground Facilities Protective Organization** for approval.

You are required to schedule all inspections with this office in Advance of work to be inspected. Please provide building permit number, name on permit and specific type of inspection requested.

- 1. Pre-site inspection if required by Code Official
- 2. Erosion control measures as dictated on plan or notes
- 3. Footing inspection when complete all rebar placement and form work; notify at least 24 hours before our (mandatory)
- 4. Foundation walls both poured concrete and block complete; Notify at least 24 hours before pour.
- 5. Footing drains and damp-proof of walls before backfill.
- 6. Interim plot plan for new homes only before any framing begins must be submitted and approved.
- 7. Framing inspection compliance to submitted approved drawings.
- 8. Rough plumbing with all required air/water tests
- 9. Mechanical Inspection includes: Furnace/Fireplace/Woodstove etc.
- 10. Rough Electrical inspection by third party, approved list supplied.
- 11. Insulation compliance inspection prior to drywall installation
- 12. Final Electrical inspection by third party agency certificate MUST BE SUBMITTED TO THIS OFFICE.
- 13. FINAL INSPECTION BY CODE OFFICIAL FOR COMPLIANCE TO SUBMITTED DRAWINGS AND N.Y.S. BUILDING CODE.
- 14. Final inspection by Fire Inspector for approval.
- 15. Provide Final As-Built for Site Plan of Project.
- 16. Final Inspection by Zoning Administrator for compliance to site plan approval and resolution.
- 17. Provide ALL certificates required by Dutchess County Board of Health.

IT SHALL BE UNLAWFUL TO OCCUPY ANY STRUCTURE UNTIL A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS ISSUED BY THE CODE ENFORCEMENT OFFICER OF THE TOWN OF WAPPINGER

Town Board Approved Electrical Inspection Agencies			
Name:	Telephone #		
Middle Department Insp. Agency, Inc.			
Dave Williams	(800) 479-4504		
New York Electrical Inspectors			
Greg Murad	(845)586-2430/(888) 693-4693		
Tom Le Jeune	(845)373-7308		
New York Board			
Pat Decina	(845)298-6792		
Tri-State Insp. Agency, Inc.			
Lou Ambrosia	(845) 986-6514		
Commonwealth Electrical Insp. Services			
Keith Sutton	(845) 527-8821		
Ron Henry	(845)562-8429		
All County Electrical Insp. Services, Inc.			
Dave Scism	(845)757-5916		
Electrical Underwriters of NY, LLC			
Ernest C Bello Jr.	(845) 569-1759		
The Inspector, LLC	(518) 497-9918		
Z3 Consultant, Inc.			
Gary Beck	(845) 471-9370		
NY Electrical Insp. & Consult, LLC			
John Wierl	(845) 551-8466		
Swanson Consulting, Inc.			
J.O. Swanson	(845)496-4443		
State Wide Inspection Services			
Frank J. Farina	(845) 202-7224		
New York Certified Electrical Inspectors			
Jerry Caliendo	(845) 294-7695		
John Metsger	(845) 339-2119		